## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2010 Election Year

IF YOUR ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS "YES," YOU CANNOT USE THIS FORM. YOU MUST USE THE LONG FORM (FORM F-7) TO FILE YOUR CAMPAIGN FINANCE REPORT.

- 1. Has your committee received any loans?
- 2. Has your committee held any fundraisers?
- 3. Has your committee received any miscellaneous receipts, such as refunds or checking account interest?
- 4. Does your committee have any unpaid bills?
- 5. Have you or anyone else given an in-kind contribution to your campaign?
- 6. Has your committee given or received a transfer of excess campaign funds?

Candidate or Committee N AFT Mono Political Party (for candida	raplia County CO	Candidate or Committee's The Angels Hay Treasurer's Mailing Address 170 East As	s (Street, Route or P.O. Box)  Kren St.
Office Sought (for candida	ites) District/Divisio	On City, State, Zip Code  Unon town, P. A	Daytime Phone # 
Primary - First Report Due March 27-April 2,2010  General - First Report Due Sept. 20-24, 2010	Pre-general Reporting Period  Pre-primary Reporting 29-30, 2016  Pre-general Reporting P	Post-primary Report Due May 24-June 23, 2	Amended Report You must also check box of appropriate
Non-Election Cycle Reporting Period:	8 8	Report Due In Calendar Year t Saturday in March or within 6 ereafter	

## REPORT TOTALS

(Fill in totals after you have completed page 2)

## **CASH BALANCE SUMMARY**

Beginning Balance (ending balance from previous report)	1.	1598.74			
Total Contributions (from Page 2)		+ 0			
Subtotal (lines 1+2)	3.	= 1598.74			
Total Expenditures (from Page 2)	4.	341.77			
Ending Balance (lines 3-4)		= 1256.97			
*Cannot have a negative ending balance					

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)	
0	Secretary second
TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)	
2023.78	

## CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date					Amount
				Full Name: Address:				
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)				
		Full Name: Address:						
				Contributor's j Where contrik Affiliation: (Po	outor works:	(Individual)		
				Full Name: Address:				
				Contributor's j Where contribution: (Po	ob: (Individu outor works: litical comm	ıal) (Individual) iittee)		
				Full Name: Address:				
				Contributor's j Where contribution: (Po	ob: (Individu outor works: litical comm	ıal) (Individual) ittee)		
	Check if additional pages			T	otal Cor	tributions:		7
k 8	ave been atached.					,		
	ITEMIZED EXPENDIT	URES (Item	nize 31	rd pary exp	enditur	es/ reimburs	sements)	
Date	Full name, residence address (if pe			·		Purpose		Amount
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	mho Voews	and the State of t		•	Sianatura	of Candidate	o Agont or	Treasurer
Date_	412-			Signature of Candidate, Agent, or Treasurer				
Date_		•				Office Use On		***************************************
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Bldg. 1, Svite 157-K 1900 Kanawha Blvd. East Churleston, WV 25305-0770 (Campaign Financial Statement) WVS05

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